



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
 UNITED STATES PATENT AND TRADEMARK OFFICE  
 WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

SERIAL NUMBER 09/481,207	FILING DATE 01/11/2000 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 40015630-003
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**APPLICANTS**

JEFFREY OWEN PHILLIPS, ASHLAND, MO

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CIP OF 09/183,422 10/30/1998  
 WHICH IS A CIP OF 08/680,376 07/15/1996 PAT 5,840,737

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED \*\* 02/15/2000**

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MO	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

**ADDRESS**

JOSEPH A MAHONEY  
 SONNENSCHEIN NATH & ROSENTHAL  
 P.O. BOX # 061080  
 WACKER DRIVE STATION, SEARS TOWER  
 CHICAGO ,IL 60606-1080

**TITLE**

NOVEL SUBSTITUTED BENZIMIDAZOLE DOSAGE FORMS AND METHOD OF USING SAME

FILING FEE RECEIVED 558	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 5317

SERIAL NUMBER 09/481,207	FILING DATE 01/11/2000 RULE	CLASS	GROUP ART UNIT 1625	ATTORNEY DOCKET NO. 40015630-003
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**APPLICANTS**

JEFFREY OWEN PHILLIPS, ASHLAND, MO;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A CIP OF 09/183,422 10/30/1998  
 WHICH IS A CIP OF 08/680,376 07/15/1996 PAT 5,840,737

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE  
 GRANTED \*\* 02/15/2000**

**\*\* SMALL ENTITY \*\***

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MO	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 8
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>JAN</i> <i>97</i> <i>97</i>				
Verified and Acknowledged	Examiner's Signature <i>JAN</i> <i>97</i> Initials <i>97</i>				

**ADDRESS**

JOSEPH A. MAHONEY  
 MAYER, BROWN & PLATT  
 P.O. BOX 2828  
 CHICAGO , IL 60690-2828

**TITLE**

NOVEL SUBSTITUTED BENZIMIDAZOLE DOSAGE FORMS AND METHOD OF USING SAME

FILING FEE RECEIVED 7167	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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SERIAL NUMBER 09/481,207	FILING DATE 01/11/00	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 40015630-003
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APPLICANT

JEFFREY OWEN PHILLIPS, ASHLAND, MO.

## \*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A CIP OF 09/183,422 10/30/98  
 WHICH IS A CIP OF 08/680,376 07/15/96 PAT 5,840,737

*yes*

## \*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

*None J.F.*

## \*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

*None J.F.*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 02/15/00 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MO	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 8
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ADDRESS <i>H6</i>	JOSEPH A MAHONEY, <i>ESQ.</i> SONNENSCHEIN NATH & ROSENTHAL 8000 SEARS TOWER P.O. BOX # 061080 233 SOUTH WACKER DRIVE <i>Wacker Drive Station, Sears Tower</i> CHICAGO IL 60606-6484 1080
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TITLE NOVEL SUBSTITUTED BENZIMIDAZOLE DOSAGE FORMS AND METHOD OF USING SAME	
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FILING FEE RECEIVED \$558	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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